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APPLICATION FOR WEAPONS CARRY LICENSE

First Middle Last (or as registered with INS)
Maiden Name, Aliases & Names Previously Used:
Date of Birth:// (Age if < 21: + attach proof of completed basic training or honorable discharge)
INS Alien/Admission No.
Sex: Race: Height Weight: Hair Color: Eye Color:
Place of Birth:
Residence/Street Address: City State, Province or District Country
City, State, Zip: County:
Mailing Address if different:
Phone Numbers: Home ()Other ()
GA Military Base of non-resident who is active military(attach copy of active duty orders)
1. Are you currently a United States Citizen?
Have you ever renounced your U.S. citizenship?
► If you are not a U.S. Chizen:
 You must show proof of name/address/date of birth/place of birth/INS or ICE number/photo ID. Identify all countries of citizenship:
• Attach: (a) Documentation of your lawful presence in the United States, for example:
-As to Immigrant Aliens: Resident Alien card, Permanent Resident Card or Immigrant Visa with Adit Stamp; OR
-As to Non-Immigrant Aliens: a Student Visa, Tourist Visa, Employment Authorization Card, or valid Passport with Arrival/Departure Record;
and
(b) Proof of residency in the State of Georgia.
2. Are you a non-immigrant (temporarily admitted) alien? [See above]
If yes, attach proof that you fall within an exemption establishing your eligibility.

10. Have you tested positive for drugs in the past year, admitted to having used drugs within the past year, or been arrested more than once in the last five years with the last arrest having been in the past year for any offense arising out of the unlawful possession, manufacturing, distribution or use of a controlled substance or other dangerous drug?
9. Have you left any state or any foreign jurisdiction to avoid criminal prosecution, to avoid testifying in any criminal proceeding, or knowing that charges are pending against you?Yes No
8. Are you under current indictment or information (formal charges) for a crime punishable by imprisonment for a term exceeding one year?
Attach proof of the date your term of incarceration or probation ended, whichever is later (if any).
If so, have you served any portion of incarceration or probation for such firearms offense in the past five years or had any other conviction or guilty plea within the past five years? Yes \square No \square
7. Have you ever been convicted of or pled guilty to carrying a weapon without a weapons carry license, or carrying a weapon or long gun in an unauthorized location?
If pardoned and firearms rights restored, attach copy of pardon.
6. Have you ever been convicted of or pled guilty to any offense arising out of the unlawful manufacture or distribution of a controlled substance or dangerous drug?
If pardoned and firearms rights restored, attach copy of pardon.
5. Have you ever been convicted of or pled guilty to any felony offense or any offense punishable by a term of imprisonment over one year, including a conviction by a court-martial under the Uniform Code of Military Justice for an offense which would constitute a felony?
If pardoned and firearms rights restored, attach copy of pardon.
4. Have you ever been convicted of, or pled guilty to, any misdemeanor crime involving the use or attempted use of physical force or threatened use of a deadly weapon towards (a) anyone as to whom at the time of the offense you were a current or former spouse, parent or guardian or similarly situated to a spouse, parent or guardian, (b) a person with whom you had a child in common, or (c) a person you lived with or had lived with as a spouse, parent or guardian or similarly situated to a spouse, parent or guardian, including but not limited to a girlfriend, boyfriend, step-child, foster child or ward?
If pardoned and firearms rights restored, attach copy of pardon.
If yes and the foregoing conviction was for a misdemeanor drug offense, have you also within the past five years been convicted of, or served any portion of incarceration or probation in that time for a second misdemeanor drug offense involving use or possession of a controlled substance, unlawful manufacture or distribution of a controlled substance or dangerous drug, or of unlawful possession or shipping of a firearm, or had a weapon carry license revoked within the last 3 years?
unlawful possession or use of a controlled substance or dangerous drug within the past five years or served any portion of incarceration or probation for use or possession of a controlled substance within the past five years?

	Notary Public
On the applicant was: issued a firearms license denied a firearms license	Sworn to and subscribed before me This day of, 20, 20, 20
APPLICANT'S SIGNATURE	
e swearing or perjury that the foregoing of my knowledge and belief.	I do swear and affirm under penalty of false swearing or perjury that the foregoing information is true and correct to the best of my knowledge and belief.
d by a judge of a probate court within the	17. Have you had a weapons carry license revoked by a judge of a probate court within the past 3 years?
Have you been hospitalized as an inpatient in any mental hospital or alcohol or drug treatment center within the past 5 years, or have you ever been ordered to receive inpatient or outpatient treatment at any treatment facility, mental health center, hospital, sanitarium, clinic or program for a mental condition, drug abuse, or alcohol abuse, by any court, board, or other authority in any civil, criminal or administrative proceeding? (If yes, attach a copy of the order)Yes	16. Have you been hospitalized as an inpatient in any mental hospital or alcohol or drug treatment center within the past 5 years, or have you ever been ordered to receive inpatient or outpatient treatment at any treatment facility, mental health center, hospital, sanitarium, clinic or program for a mental condition, drug abuse, or alcohol abuse, by any court, board, or other authority in any civil, criminal or administrative proceeding? (If yes, attach a copy of the order) Yes
Have you ever been found by a civil or criminal court, board, commission or other lawful authority, as a result of subnormal intelligence, incompetency, mental illness, condition or disease, to be a danger to yourself or others, to lack the mental capacity to manage your own affairs, or to be incompetent to stand trial, guilty but mentally ill, not guilty by reason of insanity or not guilty for lack of mental responsibility?	15. Have you ever been found by a civil or criminal court, board, commission or other lawful authority, as a result of subnormal intelligence, incompetency, mental illness, condition or disease, to be a danger to yourself or others, to lack the mental capacity to manage your own affairs, or to be incompetent to stand trial, guilty but mentally ill, not guilty by reason of instor not guilty for lack of mental responsibility?
om the U.S. Armed Forces, or separated adjudged by a general court-martial?Yes \(\sime\) No \(\sime\)	14. Have you ever been dishonorably discharged from the U.S. Armed Forces, or separated from the U.S. Armed Forces under a dismissal adjudged by a general court-martial?
ter order terminating or superceding	If yes, attach a copy of the order and any later order terminating or superceding the original order.
Are you, or have you ever been, subject to any court order (including but not limited to restraining orders, protective orders, peace bonds & good behavior bonds) restraining you from harassing, stalking, threatening, engaging in communication with, or refraining in any manner from contact with or coming in proximity to any current or former spouse, any person with whom you have a child in common, or person with whom you live or lived while in a sexual relationship?	13. Are you, or have you ever been, subject to any court order (including but not limited to restraining orders, protective orders, peace bonds & good behavior bonds) restraining you from harassing, stalking, threatening, engaging in communication with, or refraining in any manner from contact v or coming in proximity to any current or former spouse, any person with whom you have a child in common, or person with whom you live or lived while in a sexual relationship?
12. Are you addicted to or have you lost self-control over any controlled substance or drug? Yes 🗌 No 🗎	12. Are you addicted to or have you lost self-control
ring office than as prescribed by a freezeward rear, or regularly used any such drug within Yes \(\subseteq \text{No} \subseteq \)	physician, or have you done so within the past year, or regularly used any such drug within the past five years?

Applicant Privacy Rights Notification Signature Form

Applicant Notification and Record Challenge:

28 Code of Federal Regulations 16.34. procedure for obtaining a change, correction or updating an FBI identification record is set forth in Title to complete or challenge the accuracy of the information contained in the FBI identification record. The Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity

or go to the FBI website at http://fbi.gov/about-us/ciis/background-checks. Procedures for obtaining a copy of the FBI criminal history record are set forth in 28 CFR 16.30 – 16.33

Signature	
Print Name	
Date	

NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

or naturalization matter, security clearance, or adoption), you have certain rights which are a noncriminal justice purpose (such as an application for employment or a license, an immigration As an applicant who is the subject of a national fingerprint-based criminal history record check for

- You must be provided written notification that your imgerprints will be used to check the criminal history records of the FBL A. A. A.
- when you submit you's finger prints and associated personal information. This Privac Statement should explain the atthority for collecting your information and how your information will be used, refained, and shared. You must be provided, and acknowledge receipt of an adequate Privacy Act Statement This Privacy Act
- suitability for the employment license or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record. If you have a criminal history record the officials making a determination of your
- (CFR), Section 1634 Section 26 (JEE) (CFR), Section 1634 update of your criminal history record are set forth at Title 28. Code of Federal Regulations The officials must advise you that the procedures for obtaining a change correction, or
- to correct or complete the record (or decline to do so) before the officials denvy on the employment. license, or other benefit based on information in the criminal history record.

check will use monly for authoraced purposes and will not return or disseminate it in violation of federal statute, regulation or executive or standard established by the National Crime Prevention You have the right to expect that officials receiving the results of the criminal history record and Privacy Compact Council.

https://www.fbi.gov/services/cjis/identity-history-summary-checks. fingerprints and a fee to the FBL Information regarding this process may be obtained at provide you a copy of the record, you may when a copy of the record by submitting history record for review and possible challenge. It agency policy does not permit it to If agency policy permits, the officials may provide you with a sopy of your FBI criminal

the agency to verify or correct the challenged entry. Upon receipt of an official communication FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then you should send your challenge to the agency that contributed the questioned information to the accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.) forward your challenge to the agency that contributed the questioned information and request from that agency, the FBI will make any necessary changes/corrections to your record in If you decide to challenge the accuracy or completeness of your FBI criminal history record,

⁴ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).

Written notification includes electronic notification, but excludes oral notification

² https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement

³ See 28 CFR 50.12(b).

PRIVACY ACT STATEMENT

statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal however, failure to do so may affect completion or approval of your application. regulations. Providing your fingerprints and associated information is voluntary; nature of your application, supplemental authorities include Federal statutes, State associated information is generally authorized under 28 U.S.C. 534. Depending on the Authority: The FBI's acquisition, preservation, and exchange of fingerprints and

submitted to or retained by NGI. retained, your fingerprints may continue to be compared against other fingerprints information/biometrics in NGI after the completion of this application and, while otherwise responsible agency. The FBI may retain your fingerprints and associated fingerprint repositories) or other available records of the employing, investigating, or Identification (NGI) system or its successor systems (including civil, criminal, and latent comparing your fingerprints to other fingerprints in the FBI's Next Generation investigating, or otherwise responsible agency, and/or the FBI for the purpose of Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing

suitability determinations; local, state, tribal, or federal law enforcement agencies; responsible for employment, contracting, licensing, security clearances, and other criminal justice agencies; and agencies responsible for national security or public safety. disclosures to: employing, governmental or authorized non-governmental agencies published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be may be disclosed pursuant to your consent, and may be disclosed without your consent as fingerprints and associated information/biometrics are retained in NGI, your information Routine Uses: During the processing of this application and for as long thereafter as your